

# Women and Children First

## Improving maternal and neonatal health in Nkhotakota District, Malawi



Communities supported  
**295**  
Lives saved  
**176**  
Women, children and adolescents benefiting  
**83,297**

### Problem

At the time of the project Malawi had a newborn mortality rate of 22 / 1000 live births and a maternal mortality rate of 510 / 100,000 live births.

### Approach

#### WCF MNH tool

- 295 groups established 32,856 members
- Developed local answers including: bicycle ambulances; lobbying for establishment of outreach clinics; lobbying for institution of local by-laws on TBA delivery; vegetable

gardening and distribution; fishing to generate and share income; volunteering to clean local health facilities.

### Advocacy

- Groups and project staff routinely shared evidence from the project and lobbied with key decision-makers

### Results

- High level of attendance at group meetings: 29,279 women of reproductive age (28% of all) of which 18,769 were pregnant (57%) and 3,577 men (3%)
- Improvements in care-seeking: early antenatal care (11%), attending 4+ antenatal care appointments (9%), delivery with a skilled attendant (13%) and postnatal care within 7 days (15%).

- Large improvements in perceptions of services : 66% of women perceiving quality to be excellent (48% at baseline) and 68% of women perceiving services to be very accessible (59%)

### Lessons learned

- MNH groups can successfully mobilise large numbers of women, particularly pregnant women. Men can also be mobilised
- MNH groups can be effectively facilitated by volunteers
- Health surveillance assistants (a cadre of community health worker) are too busy to effectively facilitate groups, but can successfully supervise facilitators, which is a lower intensity role

[www.womenandchildrenfirst.org.uk](http://www.womenandchildrenfirst.org.uk)

### Partner

MaiKhanda Trust

### Funder

UK Aid (£250,000)

### Dates

2014 – 2016

### Project population

321,851

Nkhotakota District, Malawi



Figure 1: MNH group membership

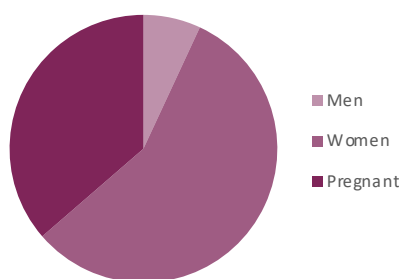


Figure 2: Care-seeking practices

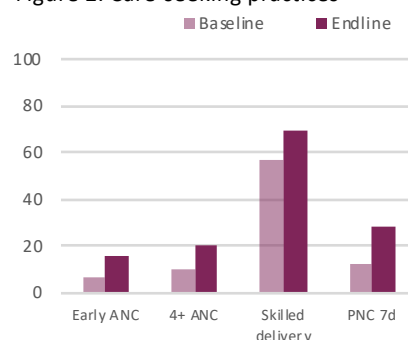
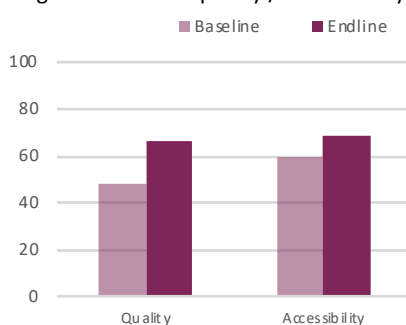


Figure 3: Service quality / accessibility



### Male MNH group member

*“Men within the project area were heavily involved right from inception, such that there was easy to get their buy-in on solutions developed to improve maternal and newborn health. These solutions included orienting men to accompany their spouses for antenatal care and taking responsibility for supporting birth preparedness”.*